

**Plaintiff
Jackie Fisher's**

**Response in Opposition
to Defendants'**

**Motion for
Summary
Judgment**

EXHIBIT

32

UTMB-CMC
Employee Task Force Report of Recommendations
August 2006
Executive Summary

The executive management team comprised of John Allen, Executive Director of Operations and Owen Murray, Chief Physician Executive authorized an Employee Task Team to address issues surfaced by Employee Focus Groups. The CMC Employee Focus Groups were composed of 198 CMC employees from all levels within the organization and representative of multiple facilities that participated in 23 individual groups. From the group sessions numerous issues were raised concerning the working environment of employees at UTMB-CMC. The issues were broken into Tier I and Tier II levels. Tier II levels were reflective of sub-groups of managerial, salaried licensed professionals and lower salaried licensed and non-licensed employees. Their areas of concern were then forwarded to an employee task team of seventeen members. This team was comprised of representatives of providers, dentists, CCA's, nursing, dental, and mental health. This team met at an intense three- day offsite facility and provided recommendations for all issues raised by the focus groups. The issues and recommendations were addressed by order of priority as submitted by the focus groups.

The most common element that surfaced was the need for employee training at all levels of the organization. Training the management staff would positively impact the organization by giving this group the tools necessary to carry out the function of their positions. A major deficit was noted in leadership, trust and communication skills and a lack of training was felt to be the contributing factor. Training was desperately needed for management to have a consistent application of policies, protocols and generalized people skills. This was a major contributor also in addressing employee morale and employee development. Input from the group indicated that as an organization, dealings with employees are consistently inconsistent. Many of the issues addressed directly impacted **Recommendation III: Develop an Office of Institutional Effectiveness.** The group felt that this recommendation would be instrumental in fostering a positive culture change within the CMC organization.

This comprehensive report provides CMC with valuable information and recommendations concerning our employees and the environment in which they work. I invite you to review it thoroughly and consider the recommendations as CMC creates its roadmap for the future within the University of Texas Medical Branch systems.

All members of the Task Team should be recognized for their dedication to the improvement of UTMB-CMC. This was not a group of disgruntled employees but they were representative of the majority of our work family, proud of what they do and the

organization they work for. They all shared a common theme and that is to make CMC a better place to be part of.

Finally, as chair of this task team my appreciation is extended to Deb Dansbe of CMC Human Resources, Kathleen Saunders, CMC Quality and Outcomes, Orson Wells, UTMB Organizational Development, Kinneil Coltman, UTMB Consulting and Communication for their tremendous contribution to this project. Their passion for this project was tremendous and their guidance and dedication is commendable.

Frederick J. Huff
Chair



UTMB Correctional Managed Care

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August 15, 2006

To our fellow employees of UTMB-CMC

As many of you are aware, for the past several months we have had employee focus group meetings regarding areas of concern within CMC. The issues extracted from these meetings were forwarded to an employee task force comprised of providers, dental, nursing, administration and mental health job families. In turn, the employee task force developed recommendations in order of priority, as established by the focus groups.

In an effort to remain open and transparent with all employees, we invite you to review first hand the primary recommendations of the task force. Upon review, you will find that many of the recommendations are unquestionably fixable, while others will require a significant investment in time and resources. We admit that a few of the recommendations are beyond the capabilities of UTMB-CMC to resolve due to legislative and other constraints beyond our scope of influence. To this end, we intend to initiate action to address all of the issues that can be addressed.

The deliberate and targeted focus on employee development and moral is truly a philosophy change for CMC. Nevertheless, CMC is long over due for a culture change, a change that truly focuses on our most valuable resource; our staff.

CMC we make a deliberate effort over the next several years toward the goal of changing our organization's culture. One of the first steps in accomplishing that goal is for CMC senior leadership to be as open and forthright regarding the issues as possible; only through open communication can CMC accomplish the task at hand.

Our employees are the single most critical element to the long-term strategic success of this organization. UTMB-CMC is very proud of our past accomplishments; however our best days still lie ahead of us. Please join us as we move forward and continue this re-organization in a progressive and positive direction for our future.

Sincerely,

Dr. Ben Raimer
VP for CMC

Dr. Own Murray
Chief Physician Executive

John D. Allen
Executive Director

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Recommendations Related to Issue

Following is a brief overview of First and Second Tier Recommendations and the issues they address by the Employee Task Force. Each individual issue is addressed in the full report in its entirety.

Recommendation I

Excessive Workload
Short Staffing
Processes and Protocols

Recommendation II

Compensation

Recommendation III

Lack of Confidence in
Supervisors/Management
Communication
Training
Professionalism
Evaluations

Recommendation IV

Senior and Regional Leadership are Out of
Touch with Units
Communication

Recommendation V

Lack of Clarity of Job Duties

Recommendation VI

Data Management Systems are Inadequate
Inadequate or Outdated
Equipment/Equipment Shortages

Recommendation VII

Lack of Employee Training
CPR Training for CCA's
Online Training

Recommendation VIII

Unscheduled Leave Policy is Unrealistic

Recommendation IX

Poor and Lacking Rewards and Recognition
Programs.

Recommendation X

Alienation from Galveston

Recommendation XI

No Career Ladder

Recommendation XII

Poor Disaster Preparedness

Second Tier Issues

Recommendation XIII

Teamwork

Recommendation XIV

Communication

Recommendation XV

Retention

Recommendation XVI

Training

Processes and Protocols

Recommendation XVII

Miscellaneous-Charities

Recommendation XVIII

Pharmacy Systems

Recommendation XIX

Turnover of Veteran Staff

Recommendation XX

Patient Care Supplies

Recommendation XXI

Formulary Medication Changes

Recommendation XXII

Patient Confidentiality

Recommendation XXIII

Consistent Health Care Delivery

Recommendation XXIV

Patient Education

Recommendation XXV

Unstable patients from Galveston

Recommendation XXVI

Galveston Providers Training on CMC

Recommendation XXVII

Scheduling Coordinator

Recommendation XXVIII

Electronic Medical Records

Recommendation XXIX

Unit Security

Security and Offender Movement

Recommendation XXX

Employee Holidays

Recommendation XXXI

Digital Radiography

Recommendation XXXII

ACA and PHD Forms
ACA Standards

Recommendation XXXIII

Environmental Conditions

Recommendation XXXIV

Single Source Documentation

Recommendation XXXV

Mileage Reimbursement

Recommendation XXXVI

Employee Evaluations

Recommendation XXXVII

Security and Offender Movement

Recommendation XXXVIII

Time Management System-Kronos